PATENT APPLICATION

DECLARATION AND POWER OF ATT FOR PATENT APPLICATION

ATTOR

POCKET NO. GDI-2

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original,							inventor (if plural names
are listed below) of the subj	ject matter which	is claimed and	tor which a p	satent is sought	on the invention	entitied:	
ACNE VACCINE the specification of which is	s attached hereto i	inless the follo	wing hov is	hecked:			
() was filed on _					national Applicat	ion	
Number	and	d was amended	l on	0. 01 1 0 1 111.01 (i	f applicable)	.1011	
I hereby state that I have re						luding th	ne claims, as amended by
any amendment(s) referred							
CFR 1.56.		Ü	•			•	·
Foreign Application(s) and/or C	_						
I hereby claim foreign priority ber have also identified below any fore							
COUNTRY	APPLICATION		DATE 1				NDER 35 U.S.C. 119
COUNTRY	AFFLICATION	NOMBER	DATE	TILLED			
						'ES:	NO:
					Y	'ES:	NO:
Provisional Application I hereby claim the benefit under To	itle 25 United States	Code Section 110	a) of any United	States provisional	I annication(s) listed	helow:	
Thereby claim the benefit under 1	ine 33, Onneu States	code section 1130	c) of any office	i States provisional	application(s) listed	ociow.	
	APPLICA	ATION SERIAL N	UMBER	FILIN	G DATE]	
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g=	<u> </u>					}	
U.S. Priority Claim Thereby claim the benefit under T	itle 35 United States	Code Section 12	of any United	States annlication(s) listed below and in	nsofar as tl	ne subject matter of each of the
claims of this application is not di	sclosed in the prior U	nited States applic	ation in the mar	mer provided by th	ne first paragraph of T	itle 35, Un	ited States Code Section 112,
acknowledge the duty to disclose				ederal Regulations,	Section 1.56(a) which	ch occurred	between the filing date of the
prizor application and the national	or PCT international t	iling date of this a	pplication:				
APPLICATION SERIAL N	IUMBER	FILING D	ATE		STATUS(patented	d/pending/a	abandoned)
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T.							
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FOWER OF ATTORNEY: As a named inventor, I hereby a	nnoint the following:	attorney(s) and/or	agent(s) listed	below to prosecut	e this application an	d transact	all business in the Patent and
Frademark Office connected there		unionney (b) una or	agom(b) notes	outen to product	• upp		
18.7			~		N. 25246		
Timothy H	. Van Dyke, Reg. No.	. 43218	Gera	ard H. Bencen, Re	eg. No. 35746		
Send Correspondence to:					Direct Telephone	Calls To:	
The state of the s					Time About Name	Dele	
Timothy H. Van Dyke Bencen & Van Dyke, P.A.					Timothy H. Van I 407-228-0328	руке	
1630 Hillcrest Street					10, 220 0020		
Orlando, Florida 32803							
I hereby declare that all statement	s made herein of my	own knowledge or	e true and that	all statements made	e on information and	helief are l	pelieved to be true; and further
that these statements were made w	ith the knowledge that	it willful false stat	ements and the	ike so made are pu	mishable by fine or ir	nprisonme	nt, or both, under Section 1001
of Title 18 of the United States Co							
Full Name of Inventor: Jack Ca	uldie				Citizenshin:		

Full Name of Inventor: Jack Gauldie	Citizenship:
Davidanas 1200 Main Stuart West Hamilton Ontario Canada	
Residence: 1200 Main Street West, Hamilton, Ontario, Canada	
Post Office Address: Same	
•	
Inventor's Signature	Date

DECLARATION AND POWER OF ATTO FOR PATENT APPLICATION (continue		ORNEY DOCKET NO. GDI-2
		Citizenship:
Residence: 1200 Main Street West, Hamilton, Ontario, Canada		
Post Office Address: Same		
rost Office Address: Same		
Inventor's Signature	. Date	
inventor's Signature	Date	
Full Name of Inventor:		Citizenship:
Residence:		
Post Office Address:		
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Full Name of Inventor:		Citizenship:
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Inventor's Signature



PTO/SB/09 (12-97)
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STATEMENT CLAIMING (37 CFR 1.9(f) & 1.27(b)) 1	SMALL ENTITY STATUS INDEPENDENT INVENTOR	Docket Number (Optional) GDI-2				
Applicant, Patentee, or Identifier: <u>Jack Gauldie et al.</u>						
Application or Patent No.:						
Filed or Issued: 12/21/2000						
Title: ACNE VACCINE						
As a below named inventor, I hereby state that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees to the Patent and Trademark Office described in:						
X the specification filed herewith with title as listed above. the application identified above. the patent identified above.						
I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey, or license, any rights in the invention to any person who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a non-profit organization under 37 CFR 1.9(e).						
Each person concern, or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:						
X No such persons, concerns, or organizations exist. Persons, concerns, or organizations are listed below:						
Separate verified statements are required from each named person, concern, or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27) I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement						
to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))						
Jack Gauldie NAME OF INVENTOR	Todd Braciak NAME OF INVENTOR					
Signature of Inventor	Signature of Inventor					
Date	Date					

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.